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MINUTES

OFFICE OF MEDICAL SERVICES  
CAREER SERVICE BOARD MEETING

Thursday, 16 December 1971

Present: DD/MS - Chairman.....  
DD/ORD - Voting Member.....  
C/CD - Voting Member.....  
C/PS - Voting Member.....  
C/OD - Voting Member.....  
C/FSS - Voting Member.....  
C/PSS - Voting Member.....  
ExO/OMS - Voting Member.....  
C/SD - Voting Member.....  
AO/FSS - Chairman, Panel C.....  
PO/OMS - Executive Secretary.....  
Secretary to DD/MS - Recording Secretary..

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1. Minutes of previous Meeting

The minutes of the Office of Medical Services Career Service Board (OMS CSB) meeting of 16 October 1970 were approved by the Members without comment.

2. Executive Secretary's Report

The Executive Secretary distributed to each Member a copy of a report since the last meeting of promotions, reassignments, EODs, conversions to staff status, and separations from SM Career Service and asked the Members to review for any corrections or omissions. It was noted that [REDACTED] name was not on the list of separations and this has been added. No other corrections or changes were made. This report is an attachment to the minutes.

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3. Panel A Report

The Chairman of Panel A [REDACTED] indicated that they have updated, as suggested by D/MS' paper of 18 May 1971, their

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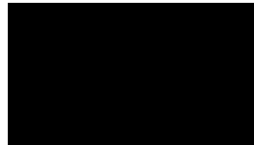
GROUP 1  
Excluded from automatic  
downgrading and  
declassification

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Panel A membership with the addition of a younger medical officer. They have added [REDACTED] to this panel and Panel A now consists of the following:

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Chairman

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**4. Panel B Report**

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The Chairman of Panel B [REDACTED] indicated that he is the sole surviving member of this panel and seeks the guidance of the Career Service Board in reconstituting the panel membership. The Chairman of the OMS CSB suggested to [REDACTED] that he make recommendations to him (Chairman, OMS CSB) on reconstituting the panel membership and he, in turn, will submit these recommendations to D/MS. [REDACTED] stated they have had three members on this panel in the past and he will recommend reconstituting it with the same number.

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**5. Panel C Report**

Chairman of Panel C [REDACTED] stated that their panel has submitted a recommendation for reconstitution of membership of this panel and they have not received a reply on this. The Chairman, OMS CSB asked ExO to look into this.

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[REDACTED] stated that Panel C is awaiting [REDACTED] Reports on GS-8s through 11s.

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**6. Discussion of D/MS paper on "Career Development for Medical Officers", dated 18 May 1971**

DD/MS opened the discussion of D/MS' memorandum on "Career Development for Medical Officers" by stating that a Professional Education Officer has not as yet been named and the group might want to address Panel A and [REDACTED] to some points to be emphasized in this paper. We have tried to follow this plan and

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the training aspects that were agreed to. He indicated that most of the members were aware of the OLC views on malpractice liability.

C/PS said that the paper is obviously directed to the needs of physicians and perhaps this paper is applicable to other panels which have not been included. C/CD commented that in their (Panel A's) preparation of this study, they would always cite Panel C. C/PS stated that if Panel A could offer Panel C some assistance in light of their experience, they would give them some points.

DD/ORD stated that he is in basic agreement with this paper but did feel that if a new doctor only read this, it would be fairly vague to him and he would probably ask a lot of questions. Professional personnel should feel they can come to the Panel (A) to talk about their career development. Any point can then be expanded with him about his career as distinct from his administrative role. This study merely serves as a background paper.

C/OD stated, however, that he felt this paper fell short of what was needed for career development. It doesn't show what a particular doctor will do from one year to the next. He feels we should branch out with an area for overseas and one for headquarters "step by step". There should be a given career development pattern for each individual. C/OD wondered how many opportunities there were for an individual to "branch out and get a 16". C/OD thinks it is a good idea to interview the wife of a prospective applicant in a social setting and they, in OD, have found this very beneficial from an operational standpoint.

With regard to the Professional Education Officer (PEO), C/OD feels this is unnecessary. "If we are physicians, we value our education and should be taking advantage of courses or meetings". He would highly resent a physician coming to him and asking him to take a particular course. If a man is given the job of PEO, he (C/OD) wonders where he will get the time to do it. C/OD stated that he felt the concept of PEO is too formally spelled out in this paper. He should informally be in a position to be consulted.

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██████████ stated that he feels it is impossible to set a fixed career development program for each individual and that this idea was essentially turned down. DD/ORD took exception to C/OD's comment about the need for a PEO. He stated that the PEO has no line function and that they (in ORD) have someone in this function in their office. The PEO would be a reservoir of information. ██████████ indicated that in talking to some of our career medical officers, he was shocked to learn that they had no awareness of where they could go for training and the opportunities available to them.

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C/PS stated that this position (PEO) was intended as an advisory one.

DD/MS commented that he wondered if some doctors wouldn't object to having a career mapped out for them on a year-to-year basis. This paper is to be used primarily to get Panel A and supervisors to help improve our career service. D/MS understands that the PEO is subject to revision but he wishes to go ahead with it.

With regard to cover problems, DD/MS stated that we have dealt with the Office of Security, primarily ██████████, on this topic and we get a tremendous amount of data from them on our applicants. If we don't feel this is enough, then we seek more professional references through their (OS) channels. We have not as yet interviewed any wives. DD/MS thinks there should be career planning and recognizes and agrees that there are limitations in OMS.

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AO/FSS wondered whether all physicians would be considered for training purposes such as "short termers" or just career physicians. He feels that our investment in short termers would exceed the benefits derived. DD/MS stated that it is a basic point that a person will be here a while before training is considered and Subject will have to be in the Career Service before he is sponsored for extensive training. There is also a payback period which requires two years of duty for each year of training.

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Training is not to be "handed out to short termers". Subject must show career interest and furthermore, external training of any length requires approval from DD/S.

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██████████ stated that he assumed AO/FSS meant long-term training and not a seminar or short period of training which he doesn't think is a horrendous expense to the staff and, we must therefore sort out those who have interest and career potential for long-term training.

C/SD wondered if you outlined to a prospective physician a career plan and then offer him a two-year contract with thirty days notice how do you justify this.

C/PS stated that perhaps an outline for career development would be all that is necessary at the beginning and this might favorably influence a prospective applicant towards considering a career with the Agency.

DD/MS stated he thinks the Members should have another opportunity to discuss this document and asked that another meeting be scheduled early in 1972.

OMS/jv (21Dec71)

Distribution:

Orig - Chairman, OMS CSB

1 - DD/ORD

1 - C/CD

1 - C/PS

1 - C/OD

1 - C/FSS

1 - C/PSS

1 - ExO/OMS

1 - C/SD

1 - AO/FSS

1 - PO/OMS

2 - O-D/MS Files

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